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|---|--|---------------------------------------|--|----------------------------------|-----------------------|---------------------|
|  National Transportation Safety Board FACTUAL REPORT AVIATION | | NTSB ID: ATL89FA071 | | | | |
| | | Occurrence Date: 01/11/1989 | | | | |
| | | Occurrence Type: Accident | | | | |
| Landing Facility/Approach Information | | | | | | |
| Airport Name ROCKINGHAM COUNTY/SHILOH | | Airport ID: NC14 | Airport Elevation 676 Ft. MSL | Runway Used 31 | Runway Length 5200 | Runway Width 100 |
| Runway Surface Type: Asphalt | | | | | | |
| Runway Surface Condition: Dry | | | | | | |
| Type Instrument Approach: SDF | | | | | | |
| VFR Approach/Landing: None | | | | | | |
| Aircraft Information | | | | | | |
| Aircraft Manufacturer CESSNA | | Model/Series 208B | | Serial Number 208B0053 | | |
| Airworthiness Certificate(s): Normal | | | | | | |
| Landing Gear Type: Tricycle | | | | | | |
| Homebuilt Aircraft? No | | Number of Seats: 2 | Certified Max Gross Wt. 8750 LBS | Number of Engines: 1 | | |
| Engine Type: Turbo Prop | | Engine Manufacturer: P&W | Model/Series: PT6A-114 | Rated Power: 600 HP | | |
| - Aircraft Inspection Information | | | | | | |
| Type of Last Inspection AAIP | | Date of Last Inspection 11/23/1988 | Time Since Last Inspection 101 Hours | Airframe Total Time 896 Hours | | |
| - Emergency Locator Transmitter (ELT) Information | | | | | | |
| ELT Installed? Yes | | ELT Operated? Yes | ELT Aided in Locating Accident Site? Yes | | | |
| Owner/Operator Information | | | | | | |
| Registered Aircraft Owner ATLANTIC AERO, INC | | Street Address P.O. BOX 35408 | | | | |
| | | City GREENSBORO | State NC | Zip Code 27425 | | |
| Operator of Aircraft ATLANTIC AERO, INC | | Street Address P.O. BOX 25408 | | | | |
| | | City GREENSBORO | State NC | Zip Code 27425 | | |
| Operator Does Business As: | | | Operator Designator Code: | | | |
| - Type of U.S. Certificate(s) Held: | | | | | | |
| Air Carrier Operating Certificate(s): On-demand Air Taxi | | | | | | |
| Operating Certificate: | | | Operator Certificate: | | | |
| Regulation Flight Conducted Under: Part 135: Air Taxi & Commuter | | | | | | |
| Type of Flight Operation Conducted: Unknown | | | | | | |
| FACTUAL REPORT - AVIATION | | | | | | |

|  National Transportation Safety Board FACTUAL REPORT AVIATION | | NTSB ID: ATL89FA071 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|--|---------------------|--|------------------------|---------------------------------|---------------------------------------|------------------|----------------------|---------|---------------------|------------------------|-----------------------|-------|------------|--------|------------|--------|------------------|------------------|-----------|------------|------|-----|------|-----|-----|--|--|--|--|--|-----------------------|------|-----|--|--|--|--|--|--|--|--|------------|--|--|--|--|--|--|--|--|--|--|--------------|--|--|--|--|--|--|--|--|--|--|--------------|--|--|--|--|--|--|--|--|--|--|---------------|--|--|--|--|--|--|--|--|--|--|
| | | Occurrence Date: 01/11/1989 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | Occurrence Type: Accident | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| First Pilot Information | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Name | | City | | State | Date of Birth | Age | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| On File | | On File | | On File | On File | 22 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Sex: M | Seat Occupied: Left | Principal Profession: Civilian Pilot | | Certificate Number: On File | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Certificate(s): Flight Instructor; Commercial | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Airplane Rating(s): Multi-engine Land; Single-engine Land | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Rotorcraft/Glider/LTA: None | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Instrument Rating(s): Airplane | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Instructor Rating(s): Airplane Single-engine | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Type Rating/Endorsement for Accident/Incident Aircraft? No | | | | Current Biennial Flight Review? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Medical Cert.: Class 1 | | Medical Cert. Status: Valid Medical--w/ waivers/lim. | | | Date of Last Medical Exam: 06/18/1988 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <table border="1"> <tr> <th rowspan="2">- Flight Time Matrix</th> <th rowspan="2">All A/C</th> <th rowspan="2">This Make and Model</th> <th rowspan="2">Airplane Single Engine</th> <th rowspan="2">Airplane Multi-Engine</th> <th rowspan="2">Night</th> <th colspan="2">Instrument</th> <th rowspan="2">Rotorcraft</th> <th rowspan="2">Glider</th> <th rowspan="2">Lighter Than Air</th> </tr> <tr> <th>Actual</th> <th>Simulated</th> </tr> <tr> <td>Total Time</td> <td>2100</td> <td>360</td> <td>1900</td> <td>300</td> <td>500</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Pilot In Command(PIC)</td> <td>1800</td> <td>350</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Instructor</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Last 90 Days</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Last 30 Days</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Last 24 Hours</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table> | | | | | | | - Flight Time Matrix | All A/C | This Make and Model | Airplane Single Engine | Airplane Multi-Engine | Night | Instrument | | Rotorcraft | Glider | Lighter Than Air | Actual | Simulated | Total Time | 2100 | 360 | 1900 | 300 | 500 | | | | | | Pilot In Command(PIC) | 1800 | 350 | | | | | | | | | Instructor | | | | | | | | | | | Last 90 Days | | | | | | | | | | | Last 30 Days | | | | | | | | | | | Last 24 Hours | | | | | | | | | | |
| - Flight Time Matrix | All A/C | This Make and Model | Airplane Single Engine | Airplane Multi-Engine | Night | Instrument | | | | | | | Rotorcraft | Glider | | | | Lighter Than Air | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | Actual | Simulated | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Total Time | 2100 | 360 | 1900 | 300 | 500 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Pilot In Command(PIC) | 1800 | 350 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Instructor | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Last 90 Days | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Last 30 Days | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Last 24 Hours | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Seatbelt Used? Yes | | Shoulder Harness Used? Yes | | Toxicology Performed? No | | Second Pilot? No | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Flight Plan/Itinerary | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Type of Flight Plan Filed: IFR | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Departure Point | | State | Airport Identifier | Departure Time | Time Zone | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| ROANOKE | | VA | ROA | 0620 | EST | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Destination | | State | Airport Identifier | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| GREENSBORO | | NC | GSO | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Type of Clearance: IFR | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Type of Airspace: Class G | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Weather Information | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Source of Briefing: Flight Service Station | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Method of Briefing: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |


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|  National Transportation Safety Board FACTUAL REPORT AVIATION | | NTSB ID: ATL89FA071 | | | |
| | | Occurrence Date: 01/11/1989 | | | |
| | | Occurrence Type: Accident | | | |

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|-------------------------------------|-----------------------|--|------------------|---------------------------------|------------------------------|
| Weather Information | | | | | |
| WOF ID | Observation Time | Time Zone | WOF Elevation | WOF Distance From Accident Site | Direction From Accident Site |
| GSO | 0650 | EST | 926 Ft. MSL | 20 NM | 206 Deg. Mag. |
| Sky/Lowest Cloud Condition: Unknown | | | 0 Ft. AGL | Condition of Light: Dawn | |
| Lowest Ceiling: Obscured | | 100 Ft. AGL | Visibility: 0 SM | Altimeter: 30.00 | "Hg |
| Temperature: 2 °C | Dew Point: 2 °C | Wind Direction: 20 | | Density Altitude: 950 | Ft. |
| Wind Speed: 4 | Gusts: | Weather Conditions at Accident Site: Instrument Conditions | | | |
| Visibility (RVR): 0 Ft. | Visibility (RVV) 0 SM | Intensity of Precipitation: Unknown | | | |
| Restrictions to Visibility: Fog | | | | | |
| Type of Precipitation: None | | | | | |

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|-----------------------------|-------|----------------|-------|--------------------|-------|
| Accident Information | | | | | |
| Aircraft Damage: | | Aircraft Fire: | | Aircraft Explosion | |
| Classification: | | | | | |
| - Injury Summary Matrix | Fatal | Serious | Minor | None | TOTAL |
| First Pilot | | 1 | | | 1 |
| Second Pilot | | | | | |
| Student Pilot | | | | | |
| Flight Instructor | | | | | |
| Check Pilot | | | | | |
| Flight Engineer | | | | | |
| Cabin Attendants | | | | | |
| Other Crew | | | | | |
| Passengers | | | | | |
| - TOTAL ABOARD - | | 1 | | | 1 |
| Other Ground | 0 | 0 | 0 | | 0 |
| - GRAND TOTAL - | 0 | 1 | 0 | | 1 |

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| FACTUAL REPORT - AVIATION | Page 4 |
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|  National Transportation Safety Board FACTUAL REPORT AVIATION | NTSB ID: ATL89FA071 | |
| | Occurrence Date: 01/11/1989 | |
| | Occurrence Type: Accident | |
| Administrative Information | | |
| Investigator-In-Charge (IIC) WALTER G. STINER | | |
| Additional Persons Participating in This Accident/Incident Investigation: REYNOLD BISHOP FAA NORTH CAROLINA WINSTON-SALEM, NC | | |
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